

The Prophylaxis of Gonorrhœa.—DR. JULES JANET, after considering the use of most of the means recommended for the prevention of gonorrhœal infection, such as the condom, the application of vaseline to the meatus before coitus, and the injection of various antiseptics (mercury bichloride 1 : 1000 to 1 : 10,000; silver nitrate, 2 per cent.; protargol, 4 to 20 per cent.), concludes with the statement that, while he recommends to his patients the instillation into the fossa navicularis of several drops of a solution of silver nitrate 2 per cent., or of protargol 20 per cent., he believes the only true prophylaxis of the disease is not to lay one's self liable to infection.—*Revue de thérapeutique*, 1903, No. 24, p. 829.

The Internal Treatment of Gonorrhœa.—DR. EDMUND SAALFELD reports excellent results in a considerable number of cases from the internal administration of capsules of gonosan, which is a preparation of the resin of kava-kava and sandal oil. Under this agent the purulent discharge in a short time becomes mucoid, the pain is diminished, painful erections are rendered less frequent and distressing, and complications, such as epididymitis, prostatitis, cystitis, and adenitis are unlikely to occur. The author believes that gonosan is of especial value in patients in whom local treatment for any reason cannot be frequently applied.—*Therapeutische Monatshefte*, 1903, No. 12, p. 626.

Extract of Thymus in Chloroanæmia.—DR. G. MARCOLONGO has experimented with the extract of the thymus gland in the chloroses of childhood and adolescence and has found that in five patients, varying in age from eight to twenty-one years, the hæmoglobin percentage and the number and resistance of the red cells rapidly increased. At the same time a considerable amelioration of the general condition and an increase in weight was noted. The preparation employed contained one part of the juice of the gland suspended in two parts of neutral glycerin. Of this, two and one-half drachms were given each morning and night.—*La semaine médicale*, 1903, No. 50, p. 412.

Potassium Iodide in Ophthalmology.—DR. A. LEPRINCE has had occasion to use this drug in various ophthalmic lesions, infantile cataract, episcleritis, scleritis, and iridocyclitis. In all the cases considerable improvement was shown after the first day and cure followed after varying periods of time, depending upon the severity of the disease. In rheumatic and arthritic lesions the treatment is especially applicable. The iodide is employed in strengths of from 1 to 2.5 per cent., depending upon the nature of the affection. Of this solution, from two to three drops are instilled into the eye from one to three times a day. The procedure is painless and provokes no reaction. In the author's opinion severe cases might be benefited by subconjunctival injections of the solution.—*Revue française de médecine et de chirurgie*, 1903, No. 57, p. 1361.

Sodium Salicylate in Lupus.—DR. A. PLIQUE calls attention to the use of sodium salicylate in two cases of lupus under his observation. Villemain the younger has experimented upon cultures of the bacillus tuberculosis and has found that only six agents produced complete sterilization; of these, four were salicylic acid derivatives, of which

sodium salicylate seemed most applicable to the purpose in hand. The drug was used in the following solution: sodium salicylate, 1; distilled water, 8. Applications of this were made morning and evening to the involved areas. The only untoward effect produced was a slightly disfiguring white pellicle. The addition to the solution of a little fuchsin produced a rose color and greatly lessened the disfigurement. This latter should be added in as small quantity as possible, so as not to diminish the tolerance of the tissues and not to increase the irritation. The two cases treated were of long standing and obstinate facial lupus; in one six weeks and in the other one month of treatment produced a considerable amelioration. The cures are not complete, since certain small hard nodules remain. The author suggests that it would be interesting to inject the solution into these, but before doing this it would be well to further observe the results of topical application.—*Journal de médecine et chirurgie pratique*, 1903, No. 24, p. 929.

OBSTETRICS.

UNDER THE CHARGE OF

EDWARD P. DAVIS, A.M., M.D.,

PROFESSOR OF OBSTETRICS IN THE JEFFERSON MEDICAL COLLEGE; PROFESSOR OF OBSTETRICS AND DISEASES OF INFANCY IN THE PHILADELPHIA POLYCLINIC; CLINICAL PROFESSOR OF DISEASES OF CHILDREN IN THE WOMAN'S MEDICAL COLLEGE; VISITING OBSTETRICIAN TO THE PHILADELPHIA HOSPITAL, ETC.

Distention of the Lower Uterine Segment Before the Rupture of the Membranes.—GOLDNER (*Monatsschrift für Geburtshülfe und Gynäkologie*, Band xviii., Heft 4, 1903) contributes an interesting and practically important paper upon this subject.

He calls attention to reported cases of rupture of the uterus in which the ovum has been expelled into the abdominal cavity with unruptured membranes. His own observations cover a period of about three years with 9000 cases of labor, among whom there were 321 cases in which the lower uterine segment became abnormally distended, and of these in 19 this distention occurred before the rupture of the membranes. From these cases he concludes that this distention arises from the great predominance of the muscular tissues in the contractile segment of the uterus. He finds that a long continuance of labor pains, repeated labor, and early rupture of the membranes all tend to produce this condition. In his 19 cases, 17 were primiparæ of the average age of childbearing. No disease which might affect the muscular tissue of the uterus was present in these cases. The children were not abnormally large, nor were there pelvic conditions which obstructed birth. In 7 of the 17 cases the cranium remained high and movable above the entrance to the pelvis. Oligohydramnios was present in 9 of the 19 cases, five times with normal pelvis and four times with contracted pelvis. Some pelvic contraction was present in 8 cases, although but 3 of these had contraction sufficiently great to influence the course of labor. In 6 cases there was absolutely no abnormality to which could be ascribed the condition. Toughness and resistance of the